

TRS SUMMER 2009 REGISTRATION FORM

Please return to:

Cobb County Parks, Recreation & Cultural Affairs (CCPRCAD), TRS Unit / 555 Nickajack Road / Mableton, GA 30126

Participant Full Name _____ Birthdate _____
Address _____ City _____, GA Zip _____ County _____
Home Phone _____ **E-MAIL:** _____
Parent/Guardian Name _____ **E-MAIL:** _____
Parent/Guardian Home Phone _____ Work Phone _____
Cell Phone _____
Group Home Case Mgr Name & # _____
Alternate Emergency Contact _____ Relationship to Participant _____
Home Phone _____ Cell Phone _____
Do you pay city property taxes? _____ yes _____ no

Registration begins May 20, 2009. Walk-in registration will be taken 10:00 am – 2:00 pm. Mail registration form with payment to our office at the above address.

Please check the programs for which you want to register:

Social Club (see below for #).....\$35 _____	Sock Hop.....#23956.....\$10 _____
Swim class.....# 24099..\$60 _____	Island Dance Party.....#23953....\$10 _____
Tennis Class.....#23955....\$20 _____	Fashion Show Participant....#22923....\$10 _____
Afternoon Bowling..... #23950...\$30 _____	Fashion Show Spectator.....#22921....\$5 _____
Dance & Movement.....#23952...\$20 _____	Family Picnic In the Park.....#23951....\$10 _____
White Water.....#23971...\$40 _____	Braves VS San Francisco..#24059.....\$25 _____
Six Flags Summer of Fun #24061..\$48 _____	Braves VS NY Mets.....#24058.....425 _____
Six Flags Pass Holders...#24062...\$15 _____	Special Pops Night @ Fair _____

Member of _____ Social Club (assignment to club by staff required prior to registration)
Explorers 21 - #23959 Explorers 31 - #23960 Red/Green Dreamers- #23961 Yellow Dreamers - #23962
Drifters - #23964 Travelers - #23965 Voyagers - #23966

Optional Insurance (Once Yearly).....\$6 _____
Non-Resident Fee of \$25.....\$25 _____
Total Fee Paid This Quarter..... \$ _____

REGISTRATION POLICIES & PROCEDURES

Payment Policy: Full payment of program fees must be included with the registration form. No partial payments will be accepted. **We now accept MasterCard & Visa.** Please **do not** write your credit card number on the registration form to mail in. Credit card payments must be done in person or over the phone. Make checks and money orders payable to CCPRCAD and include driver's license number.

THERE WILL BE A \$25 FEE ON ANY CHECKS RETURNED UNPAID BY YOUR BANK.

Non-Resident Policy: A mandatory \$25 non-resident fee will be charged to all out-of-county residents participating in this Cobb County program.

Refund Policy: NO REFUNDS will be issued if TRS has incurred costs due to purchase of tickets, rentals, supplies, refreshments, deposits, etc...

Refund requests must be made in writing a minimum of 5 work days before the program. Social clubs and all TRS special events or classes must be PAID IN FULL. No Exceptions. Refunds will be processed at the end of the quarter.

Inclement Weather: If a program is cancelled by the department due to weather, the program will be made up at a later date or refunds issued.

***We must have an updated medical form in our office at all times. They are good for two years unless there have been changes in the participant's medical condition.**

When providing transportation, do you require wheelchair accessibility? _____ Yes or _____ No

FOR STAFF USE ONLY

Total Amt. Paid \$ _____ Receipt # _____ Check # _____ MC/VISA Authorization Code # _____
Name on Receipt _____ Date _____ Staff Initials _____